

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT(S)

FILING DATE

10/56093
19 DEC 2006

CLAIMS

| | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | |
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| TOTAL DEP. | 8 | 8 | 8 | 8 | 8 | 8 |
| TOTAL CLAIMS | 9 | 8 | 8 | 8 | 8 | 8 |

| | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | |
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| TOTAL IND. | 1 | 1 | 1 | 1 | 1 | 1 |
| TOTAL DEP. | 8 | 8 | 8 | 8 | 8 | 8 |
| TOTAL CLAIMS | 9 | 8 | 8 | 8 | 8 | 8 |

BEST AVAILABLE COPY